

General

Title

Cervical cancer screening: percentage of women age 21 years and older screened in accordance with evidence-based standards.

Source(s)

Bussey S, Warner K. 2014 clinical indicators report: 2013/2014 results. Minneapolis (MN): HealthPartners; 2014 Oct. 131 p.

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Process

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the percentage of women age 21 years and older screened for cervical cancer in accordance with evidence-based standards:

One screening Pap test in the measurement year or two years prior for women ages 24 to 64 and no history of hysterectomy

No screening Pap test in the measurement year for women ages 65 and older, or women ages 24 and older with history of hysterectomy

Not screened:

No screening Pap test in the measurement year or two years prior for women ages 24 to 64 and no history of hysterectomy

Screened more frequently:

Two or more screening Pap tests in the measurement year or two years prior for women ages 24 to

64 and no history of hysterectomy

One or more screening Pap tests in the measurement year for women ages 65 and older

One or more screening Pap tests for women ages 24 and older with history of hysterectomy

Note: Due to a 3 year look-back period, this measure includes screening for all women ages 21 and older.

Rationale

Multiple studies indicate that over 50% of cervical cancers occur in women who have never been screened. At the same time, many women are screened for cervical cancer more frequently than is supported by the evidence, resulting in significant unnecessary health care expenditures and patient inconvenience. Therefore, it is this population that the guideline is intended to impact the greatest. Significant risk factors for cervical cancer are failure to be screened on a regular basis and a previously abnormal Pap test within the last five years.

Screening need not be performed for women who have had a hysterectomy for benign disease, provided they have no history of cervical intraepithelial neoplasia (CIN) 2 or CIN 3.

Women with a history of CIN 2/3 prior to but not as the indication for hysterectomy should be screened until three consecutive, technically satisfactory normal/negative vaginal cytology tests with no abnormal/positive cytology test within a ten-year period are achieved.

Initially all women should have annual Pap test screening beginning at age 21 or at three years after the onset of sexual activity.

It is appropriate to resume Pap test screening in a woman age 65 and older who has a new sexual partner.

After three consecutive normal Pap tests, and no dysplasia within the last five years, women may have their screening performed less frequently at the discretion of the clinician and patient.

Evidence for Rationale

Institute for Clinical Systems Improvement (ICSI). Preventive services for adults. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2010 Sep. 79 p. [167 references]

Primary Health Components

Cervical cancer screening; Pap test

Denominator Description

All women age 24* years and older as of December 31 of the measurement year who were continuously enrolled for three years (see the related "Denominator Inclusions/Exclusions" field)

*Due to a 3 year look-back period, this measure includes screening for all women ages 21 and older.

Numerator Description

The number of women from the denominator screened in accordance with evidence-based standards (see the related "Numerator Inclusions/Exclusions" field)

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

Additional Information Supporting Need for the Measure

Refer to the *2014 Clinical Indicators Report*, which features comparative provider performance on measures of clinical quality, patient experience and affordability related to preventive and chronic care, behavioral health, pharmacy, specialty care, hospital care and total cost of care. A technical supplement to the *2014 Clinical Indicators Report* is also available and includes measurement detail, optimal component rates, trended plan rates over time and external benchmarks.

Evidence for Additional Information Supporting Need for the Measure

Bussey S, Warner K. 2014 clinical indicators report: 2013/2014 results. Minneapolis (MN): HealthPartners; 2014 Oct. 131 p.

Bussey S, Warner K. 2014 clinical indicators report: 2013/2014 results. Technical supplement. Minneapolis (MN): HealthPartners; 141 p.

Extent of Measure Testing

Unspecified

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Ambulatory/Office-based Care

Managed Care Plans

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Statement of Acceptable Minimum Sample Size

Unspecified

Target Population Age

Age greater than or equal to 21 years

Target Population Gender

Female (only)

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Health and Well-being of Communities

Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Staying Healthy

IOM Domain

Effectiveness

Data Collection for the Measure

Case Finding Period

January 1 to December 31 of the measurement year

Denominator Sampling Frame

Enrollees or beneficiaries

Denominator (Index) Event or Characteristic

Patient/Individual (Consumer) Characteristic

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

All women age 24* years and older as of December 31 of the measurement year who were continuously enrolled for three years

*Due to a 3 year look-back period, this measure includes screening for all women ages 21 and older.

Exclusions

Members who have a history of any abnormal cervical cancer screening, including cervical human papillomavirus (HPV), within five years or with a history of cervical cancer are excluded.

Note: The following International Classification of Diseases, Ninth Revision (ICD-9) codes apply to this measure:

Non-Specific Abnormal Pap Smear and Cervical HPV: 795.0x, 795.1, 795.2, 079.4

Dysplasia: 622.1

Cervical Cancer: 233.1, 180.0, 180.1, 180.8, 180.9, V10.40, V10.41, V10.42, V10.44

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

The number of women from the denominator screened in accordance with evidence-based standards:

One screening Pap test in the measurement year or two years prior for women ages 24 to 64 and no history of hysterectomy

No screening Pap test in the measurement year for women ages 65 and older or women ages 24 and older with history of hysterectomy

Not screened:

No screening Pap test in the measurement year or two years prior for women ages 24 to 64 and no history of hysterectomy

Screened more frequently:

Two or more screening Pap tests in the measurement year or two years prior for women ages 24 to 64 and no history of hysterectomy

One or more screening Pap tests in the measurement year for women ages 65 and older

One or more screening Pap tests for women ages 24 and older with history of hysterectomy

Note: The following codes apply to this measure:

Cervical Cancer Screening Codes (per Healthcare Effectiveness Data and Information Set [HEDIS] specs):

Specific Current Procedure Terminology (CPT) codes (refer to the original measure documentation for specific CPT codes)

International Classification of Diseases, Ninth Revision (ICD-9) DX codes V76.2, V72.32

ICD-9 Procedure codes 91.46

Revenue codes 923

Healthcare Common Procedure Coding System (HCPCS) codes G0101, G0123, G0124, G0141, G0143-G0145, G0147, G0148, P3000, P3001, Q0091

Hysterectomy Codes (per HEDIS specs): Used in combination with number of cervical cancer screenings to determine if patient was in accordance with evidence based standards.

Specific CPT codes (refer to the original measure documentation for specific CPT codes)

ICD-9 DX codes 618.5, V67.01, V76.47, V88.01, V88.03

ICD-9 Procedure codes 68.4-68.8

Exclusions

Diagnostic Pap tests are not counted. They are identified by specific CPT codes (refer to the original measure documentation for specific CPT codes) with ICD-9 795.0.

Numerator Search Strategy

Fixed time period or point in time

Data Source

Administrative clinical data

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

Unspecified

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Rate/Proportion

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Standard of Comparison

not defined yet

Identifying Information

Original Title

Evidence-based cervical cancer screening—primary care: average risk asymptomatic women.

Measure Collection Name

HealthPartners Clinical Indicators

Measure Set Name

Cervical Cancer

Submitter

HealthPartners - Managed Care Organization

Developer

HealthPartners - Managed Care Organization

Funding Source(s)

HealthPartners

Composition of the Group that Developed the Measure

- Provider Measurement Committee
- Preventive Services Quality Committee

Financial Disclosures/Other Potential Conflicts of Interest

None

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2014 Oct

Measure Maintenance

Date of Next Anticipated Revision

2015 Oct

Measure Status

This is the current release of the measure.

This measure updates a previous version: Wehrle D, Bussey S. 2013 clinical indicators report: 2012/2013 results. Minneapolis (MN): HealthPartners; 2013 Oct. 134 p.

The measure developer reaffirmed the currency of this measure in February 2017.

Measure Availability

Source available from the [HealthPartners Web site](#) .

For more information, contact the HealthPartners Quality Measurement and Improvement Department at 8170 33rd Ave S., Bloomington, MN 55425; Phone: 952-883-5777; E-mail: quality@healthpartners.com; Web site: <https://www.healthpartners.com/provider-public/quality-and-measurement/> .

Companion Documents

The following are available:

HealthPartners. National Quality Measures Clearinghouse (NQMC) measure submission form: Cervical cancer screening: percentage of women ages 21 years and older screened in accordance with evidence-based standards. 2012 Oct. 10 p.

Institute for Clinical Systems Improvement (ICSI). Preventive services for adults. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2010 Sep. 79 p.

Bussey S, Warner K. 2014 clinical indicators report: 2013/2014 results. Technical supplement.

Minneapolis (MN): HealthPartners; 141 p. This document is available from the [HealthPartners Web site](#) .

NQMC Status

This NQMC summary was completed by ECRI Institute on May 23, 2008. The information was verified by the measure developer on June 20, 2008.

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Production

Source(s)

Bussey S, Warner K. 2014 clinical indicators report: 2013/2014 results. Minneapolis (MN): HealthPartners; 2014 Oct. 131 p.
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